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FROM- MATTINGLY, STANGER & MALUR, P.C.

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Date: May 10, 2004

FACSIMILE COVER LETTER

Facsimile Number: (703) 872-9306

To: Examiner M. Maskulinski
Group Art Unit 2184, USPTO


From: Mr. Daniel J. Stanger
MATTINGLY, STANGER & MALUR, P.C.

Re: USSN 09/622,372
Attorney Docket No.: ASA-904

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

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CHANGE OF CORRESPONDENCE ADDRESS APPLICATION; and
Credit Card Payment Form in the amount of \$420.00
In payment of Two-month Extension of Time Fee.


Daniel J. Stanger
Reg. No. 32,846

5/10/2004
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FORM PTO-1083

PATENT

Case Docket No. ASA-904

In RE application of T. SEKIGUCHI et al

Serial No.: 09/622,372

Group Art Unit: 2184

Filed: August 16, 2000

Examiner: M. Maskulinski

For: COMPUTER SYSTEM AND FAULT PROCESSING
METHOD IN COMPUTER SYSTEMAssistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☐ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.☐ No additional fee is required.

The fee has been calculated as shown below:

	(COL. 1)		(COL. 2)	(COL. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra
Total	8	Minus	10	0
Indep.	2	Minus	3	0
<input type="checkbox"/> First Presentation of Multiple Dependent Claims				

SMALL ENTITY

Rate	Additional Fee
x 9	\$
x 42	\$
+ 140	\$
Total	\$

OR

OTHER THAN A SMALL ENTITY

Rate	Additional Fee
x 18	\$ 0
x 84	\$ 0
+ 280	\$ 0
Total	\$ 0

OR

* If the entry in Col. 1 is less than the entry in Col. 2, write '0' in Col. 3.
 * If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, write '20' in this space.
 * If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 3, write '3' in this space.
 * The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

☐ Please charge my Deposit Account No. 50-1417 in the amount of \$ _____.

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 A check in the amount of \$ 420.00 is attached in payment of:
Two-month Extension of Time Fee

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1417.☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.☒ Any patent application processing fees under 37 CFR 1.17.☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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Date: May 10, 2004By: 

Daniel J. Stanger
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